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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**Docket Number (Optional)  
0815AAA

In re Application of Rudolf Jung et al.

Application Number 09/020,716 Filed 02/09/1998

For Alteration of Amino Acid Compositions in Seeds

Art Unit 1638 Examiner McElwain, Elizabeth F.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |   |          |
|---|----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$110.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$_____  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$_____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$_____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$_____  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.      |          |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |          |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |          |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  |          |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>16-1852</u> . |          |

I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record.

attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

June 27, 2003

Date

(515) 334-4467

Telephone Number

Signature

Marianne H. Michel

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

07/01/2003 MMHAMM1 00000063 09020716

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110.00 DA

# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number 09/020,716  Filing Date 02/09/1998  First Named Inventor Rudolf Jung  Art Unit 1638  Examiner Name McElwain, Elizabeth F.
Total Number of Pages in This Submission 29	Attorney Docket Number 0815AAA	<span style="font-size: 2em; color: red; font-weight: bold; opacity: 0.5;">RECEIVED</span> <span style="font-size: 1em; color: black; font-style: italic;">TECH CENTER 4200</span>

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>  <input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) <i>(please identify below)</i>
<input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Marianne H. Michel	
Signature		
Date	June 27, 2003	

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name		
Signature		Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**FEE TRANSMITTAL  
for FY 2003**

Effective 01/01/2003 Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 278**Complete if Known**

Application Number	09/020 716
Filing Date	02/09/1998
First Named Inventor	Rudolf Jung
Examiner Name	McElwain, Elizabeth F
Group / Art Unit	1638
Attorney Docket No	0815AAA

RECEIVED  
TECH CENTER 1290  
JUN 3 2003

**METHOD OF PAYMENT (check all that apply)**
 Check    Credit card    Money    Other    None  
 Deposit Account Order
Deposit  
Account  
Number

16-1852

Deposit  
Account  
Name

Pioneer Hi-Bred International, Inc

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below    Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee  
 to the above-identified deposit account
**FEE CALCULATION****1 BASIC FILING FEE****Large Entity**   **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

**SUBTOTAL (1)**

(\$ 0)

**2. EXTRA CLAIM FEES**

Total Claims	17	-21 **	=	0	X	18	=	0
Independent Claims	9	-7 **	=	2	X	84	=	168
Multiple Dependent			X				=	0

**Large Entity**   **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)**

(\$ 168)

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1051	130	2051	65 SurchARGE - late filing fee or oath
		1052	50	2052	25 SurchARGE - late provisional filing fee or cover sheet
		1053	130	1053	130 Non-English specification
		1812	2,520	1812	2,520 For filing a request for reexamination
		1804	920*	1804	920* Requesting publication of SIR prior to Examiner action
		1805	1,840*	1805	1,840* Requesting publication of SIR after Examiner action
		1251	110	2251	55 Extension for reply within first month
		1252	410	2252	205 Extension for reply within second month
		1253	930	2253	465 Extension for reply within third month
		1254	1,450	2254	725 Extension for reply within fourth month
		1255	1,970	2255	985 Extension for reply within fifth month
		1401	320	2401	160 Notice of Appeal
		1402	320	2402	160 Filing a brief in support of an appeal
		1403	280	2403	140 Request for oral hearing
		1451	1,510	1451	1,510 Petition to institute a public use proceeding
		1452	110	2452	55 Petition to revive – unavoidable
		1453	1,300	2453	650 Petition to revive – unintentional
		150*	1,300	2501	650 Utility issue fee (or reissue)
		1502	470	2502	235 Design issue fee
		1503	630	2503	315 Plant issue fee
		1460	130	1460	130 Petitions to the Commissioner
		1807	50	1807	50 Processing fee under 37 CFR 1.17 (q)
		1806	180	1806	180 Submission of Information Disclosure Stmt
		8021	40	8021	40 Recording each patent assignment per property (times number of properties)
		1809	750	2809	375 Filing a submission after final rejection (37 CFR § 1.129(a))
		1810	750	2810	375 For each additional invention to be examined (37 CFR § 1.129(b))
		1801	750	2801	375 Request for Continued Examination (RCE)
		1802	900	1802	900 Request for expedited examination of a design application
		Other fee (specify) _____			
		*Reduced by Basic Filing Fee Paid			
		<b>SUBTOTAL (3)</b>			
		(\$ 110)			

\*\*or number previously paid, if greater. For Reissues, see above

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>		
Name (Print/Type)	Marianne H. Michel	Registration No. Attorney/Agent)	35,286	Telephone (515) 334-4467
Signature				Date June 27, 2003

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